



Office of the Secretary of State  
Corporations Section  
P.O. Box 13697  
Austin, Texas 78711-3697

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## STATEMENT OF QUALIFICATION OF A FOREIGN LIMITED LIABILITY PARTNERSHIP

1. The name of the partnership is \_\_\_\_\_

(The name must include the words "registered limited liability partnership," "limited liability partnership" or the abbreviation "R.L.L.P.," "L.L.P.," "RLLP" or "LLP" as the last words or letters of its name.)

2. The federal tax identification number of the partnership is \_\_\_\_\_

3. The state of formation is \_\_\_\_\_ and the date of its initial registration as a limited liability partnership under the laws of such state is \_\_\_\_\_

4. As of the date of the submission of this filing, the foreign limited liability partnership validly exists as a limited liability partnership under the laws of the state of formation.

5. The street address of a partnership office in Texas is \_\_\_\_\_

\_\_\_\_\_ and the street address of the partnership's chief executive office is \_\_\_\_\_

6. The street address of its proposed registered office in Texas is (a P.O. Box is not sufficient) \_\_\_\_\_

\_\_\_\_\_ and the name of its proposed registered agent at such address is \_\_\_\_\_

7. The limited liability partnership hereby appoints the Secretary of State of Texas as its agent for service of process under the circumstances set forth in section 10.05(k) of the Texas Revised Partnership Act.

8. The number of partners in this state at the date of submission is \_\_\_\_\_

9. The partnership engages in the business specified below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. This statement has been executed by a majority in interest of the partners or by one or more partners authorized by a majority in interest of the partners.

\_\_\_\_\_  
Name of the partnership

Date: \_\_\_\_\_

By: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### INSTRUCTIONS

1. A qualification is effective for a term of one year from the date the statement is filed by the secretary of state unless revoked, renewed, or voluntarily withdrawn by filing a written withdrawal notice. A partnership may renew its qualification by filing an application for renewal prior to the expiration of the term of qualification. (Form 308)
2. The statement must be executed by a majority in interest of the partners or by one or more partners authorized by a majority in interest of the partners. Prior to signing, please review carefully the statements set forth in the document. A person commits an offense under section 10.02(m) of the Texas Revised Partnership Act if the person signs a document the person knows is false in any material respect with the intent that the document be delivered on behalf of the partnership to the secretary of state for filing. The offense is a Class A misdemeanor.
3. Two copies of the form along with the filing fee should be mailed to the address shown in the heading of this form. The delivery address is James Earl Rudder Office Building, 1019 Brazos, Austin, Texas 78701. If the statement of qualification is properly completed and submitted with the correct filing fee, the secretary of state will file the statement, send a letter acknowledging filing, and, if a duplicate copy was provided for such purpose, return a file stamped copy. The telephone number is (512) 463-5555, TDD: (800) 735-2989, FAX: (512) 463-5709. E-mail inquiries may be directed to *corphelp@sos.state.tx.us*. Additional forms and information also may be obtained from our website at *http://www.sos.state.tx.us*.
4. The filing fee is \$200 for each partner in this state, but not less than \$200 or more than \$750. The check or money order must be payable through a U.S. bank or other financial institution. Fees payable to the secretary of state may be paid with a current, valid Visa®, Discover®, or MasterCard®. Fees paid by credit card are subject to a statutorily authorized processing cost of 2.1% of the total fees.
5. This form is designed to meet minimum statutory filing requirements; no warranty is made regarding the suitability of this form for any particular purpose. This form and the information provided are not substitutes for the advice of an attorney.